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Bib Data Sheet

CONFIRMATION NO. 9393

<b>SERIAL NUMBER</b> 09/929,904	<b>FILING DATE</b> 08/14/2001 <b>RULE</b>	<b>CLASS</b> 707 715	<b>GROUP ART UNIT</b> 2177 2176	<b>ATTORNEY DOCKET NO.</b> EQUI0001CIP
<b>APPLICANTS</b> Christopher Samaniego, San Francisco, CA; Nelson H. Rocky Offner, Kensington, CA; Adrian D. Thewlis, Sausalito, CA; David R. Boyd, San Francisco, CA; David C. Salmon, San Rafael, CA; Joshua N. Devan, Kentfield, CA;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CIP OF 09/425,326 10/21/1999 <i>OK</i> AND CLAIMS BENEFIT OF 60/226,043 08/16/2000 <i>OK</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 09/18/2001				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Wilson</i> Acknowledged <i>Barone</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 23	<b>TOTAL CLAIMS</b> 13
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> 22862				
<b>TITLE</b> Automated media delivery system				
<b>FILING FEE RECEIVED</b> 395	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	